

Agency*	Citation(s)	Groups Covered
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☒ The State covers only the following groups or groups of individuals:

1902(a)(10)
(A)(ii) and
1905(a) of
the Act

☐ Aged
☐ Blind
☐ Disabled
☒ Individuals under the age of--
 ☐ 21
 ☐ 20
 ☒ 19
 ☐ 18
☒ Caretaker relatives
☒ Pregnant women

436.222

9. ☐ a. All individuals who are not described in section 1902(a)(10)(A)(i) of the Act, and who meet the income and resource requirements of the AFDC State plan and who are under the age of--

1902(a)(10)(A)(i)
of the Act
P.L. 97-248
(Section 137)

☐ 21
☐ 20
☐ 19
☐ 18

☒ b. Reasonable classifications of financially eligible individuals under the ages of 21, 20, 19, or 18 as specified below:

☒ (1) Individuals for whom public agencies are assuming full or partial financial responsibility and who are:

☒ In foster homes (and are under the age of 19).

☐ In private institutions (and are under the age of).

*Agency that determines eligibility for coverage.

TN No. 87-2
Supersedes
TN No. 85-3

Approval Date SEP 9 1987

Effective Date 7/1/87

HCFA ID: 0249C/0002P

Agency*	Citation(s)	Groups Covered
		<p>___ In addition to the group under (b)(1), individuals placed in foster homes or private institutions by private, nonprofit agencies (and under the age of ___).</p> <p>___ (2) Individuals in adoptions subsidized in full or part by a public agency (who are under the age of ___).</p> <p>___ (3) Individuals in ICFs (who are under the age of ___).</p> <p>___ (4) In addition to the group under (b)(3), the individuals in ICF/MRs (who are under the age of ___).</p> <p>___ (5) Individuals in psychiatric facilities or programs (who are under the age of ___).</p> <p>___ (6) Other defined groups (and ages), as specified in Supplement 1 of <u>ATTACHMENT 2.2-A</u>.</p>
1902(a)(10) (A)(ii)(VIII) of the Act, P.L. 99-272 (Section 9529)	___ 10.	<p>A child for whom there is in effect a State adoption assistance agreement (other than under title IV-E of the Act), who, as determined by the State adoption agency, cannot be placed for adoption without medical assistance because the child has special needs for medical or rehabilitative care, and who before execution of the agreement--</p> <p>(i) Was eligible for Medicaid under the State's approved Medicaid plan; or</p> <p>___ (ii) Would have been eligible for Medicaid if the standards and methodologies of title IV-E of the Act for the foster care program were applied rather than using the AFDC standards and methodologies.</p>

*Agency that determines eligibility for coverage.

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TN No. 0

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HCFA ID: 0249C/0002P

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The State covers only the following group or groups of individuals under the age of--

☐ 21
☐ 20
☐ 19
☐ 18

436.230 ☒ 11. Essential spouse of a recipient of:

☒ OAA ☒ AB ☒ APTD ☐ AABD

Spouse is living with and determined essential to the well being of the recipient of OAA, AB, APTD, or AABD, and his (her) needs are taken into consideration in determining the amount of financial assistance.

1902(a)(10) ☐ 12. The following individuals who are not described
(A)(ii)(IX) in section 1902(a)(10)(A)(i) of the Act whose
and 1902(1) income does not exceed the income level
of the Act, (established at an amount up to 100 percent of
P.L. 99-509 the Federal nonfarm poverty line) for a family
(Secs. 9401(a) of the same size (including the woman, infant,
and (b)) or child) specified in Supplement 1 to
ATTACHMENT 2.6-A and who meet the resource
standards specified in Supplement 3 to
ATTACHMENT 2.6-A:

- a. Women during pregnancy (and during the 60-day period beginning on the last day of pregnancy) and infants under one year of age (effective April 1, 1987);
- ☐ b. Children who have attained one year of age but not attained two years of age (effective October 1, 1987);
- ☐ c. Children who have attained two years of age but not attained three years of age (effective October 1, 1988);

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- ☐ d. Children who have attained three years of age but not attained four years of age (effective October 1, 1989);
- ☐ e. Children who have attained four years of age but not attained five years of age (effective October 1, 1990).

Infants and children covered under items B.12.a. through e. who are receiving inpatient services on the date they reach the maximum age for coverage under the approved plan will continue to be eligible for inpatient services until the end of the stay for which the inpatient services are furnished.

The payment levels under the approved State AFDC plan are no lower than the AFDC payment levels in effect under the approved AFDC plan on April 17, 1986.

☒ Yes

☐ Not applicable. The State does not provide coverage of this optional categorically needy group.

- 1902(a)(10) ☐ 13. In addition to individuals covered under item
(A)(ii)(X) B.12. above, individuals--
and 1902(m)(1)
and (2)
of the Act,
P.L. 99-509
(Secs. 9402(a)
and (b))
- a. Who are 65 years old or older or are disabled as determined under AABD or APTD;
 - b. Whose income does not exceed the income level (established at an amount up to 100 percent of the Federal nonfarm income poverty line) specified in Supplement 1 to ATTACHMENT 2.6-A for a family of the same size; and

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c. Whose resources do not exceed the maximum amount allowed under OAA, AABD, or APTD or under the State's medically needy program.

1902(a)(47) and 1920 of the Act, P.L. 99-509 (Section 9407)	14. Pregnant women who meet the applicable income levels for the categorically needy specified in this plan under <u>ATTACHMENT 2.6-A</u> who are determined eligible during a presumptive eligibility period by a qualified provider in accordance with section 1920 of the Act.
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436.301 C. Optional Coverage - Medically Needy

This plan includes the medically needy.

X No.

 Yes. This plan covers:

- | | |
|---|--|
| 1902(a)(10) (C)(ii)(II) of the Act, P.L. 97-248 (Section 137) | 1. Pregnant women who, except for income and resources, would be eligible as categorically needy. |
| 1902(e) of the Act, P.L. 99-272 (Section 9501) | 2. Women who, while pregnant, were eligible for, have applied for, and have received Medicaid as medically needy under the approved State plan. These women continue to remain eligible, as though they were pregnant, for all pregnancy-related and postpartum medical assistance under the plan for 60 days after the pregnancy ends. The 60-day period begins on the last day of pregnancy. |
| 1902(a)(10) (C)(ii)(I) of the Act, P.L. 97-248 (Section 137) | 3. Individuals under age 18 who, but for income and resources, would be eligible under section 1902(a)(10)(A)(i) of the Act. |

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Agency*	Citation(s)	Groups Covered
	1902(e)(4) of the Act, P.L. 98-369 (Section 2362)	4. Newborn children born on or after October 1, 1984, to a woman who is eligible as medically needy and is receiving Medicaid on the date of the child's birth. The child is deemed to have applied and been found eligible for Medicaid on the date of birth and remains eligible for one year so long as the woman remains eligible and the child is a member of the woman's household.
	436.308	5. Financially eligible individuals who are not described in section C.(3) above and who are under the age of--
	1902(a)(10) (C)(ii) of the Act	21 20 19 18
	436.310	6. Caretaker Relatives
	436.320	7. Aged
	436.321	8. Blind
	436.322	9. Disabled
	1902(a)(47) and 1920 of the Act, P.L. 99-509 (Section 9407)	10. Pregnant women who meet the applicable medically needy income levels specified in this plan under <u>ATTACHMENT 2.6-A</u> who are determined eligible during a presumptive eligibility period by a qualified provider in accordance with section 1920 of the Act.

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	1902(a)(10)(E), 1902(m)(3), and 1905(p) of the Act, P.L. 99-509 (Section 9403)	D. <u>Optional Coverage - Qualified Medicare Beneficiaries</u> In addition to pregnant women and infants or children covered under section 1902(a)(10)(A)(ii)(IX) of the Act, individuals-- 1. Who are entitled to hospital insurance benefits under Medicare Part A; 2. Who, except for coverage under section 1902(a)(10)(E) of the Act, are not eligible for medical assistance under the plan; 3. Whose income does not exceed the income level (established at an amount up to 100 percent of the Federal nonfarm income poverty line) specified in Supplement 1 to <u>ATTACHMENT 2.6-A</u> for a family of the same size; and 4. Whose resources do not exceed the maximum amounts allowed under OAA, AB, AABD, or APTD, or under the State's medically needy level (if the State has a medically needy program). 1902(p)(3) of the Act, P.L. 99-509 (Section 9403(c))

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B. Optional Coverage Other Than The Medically Needy

1902(a) (10) (A)
(ii) (XIV) of the Act

X 19. Optional Targeted Low Income Children Who:

a. are not eligible for Medicaid under any other optional or mandatory eligibility group or eligible as medically needy (without spend down liability);

b. would not be eligible for Medicaid under the policies in the State's Medicaid plan as in effect on April 15, 1997 (other than because of the age expansion provided for in §1902 (1) (2) (D):

c. are not covered under a group health plan or other group health insurance (as such terms are defined in §2791 of Public Health Service Act coverage) other than under a health insurance program in operation before July 1, 1997 offered by a State which receives no Federal funds for the program:

d. have family income at or below:

200 percent of the Federal poverty level for the size family involved, as revised annually in the Federal Register; or

A percentage of the Federal poverty level, which is in excess of the "Medicaid applicable income level" (as defined in §2110 (b) (4) of the Act) but by no more than 50 percentage points.

The State covers:

X All children described above who are under age 19 (18, 19) with family income at the current Medicaid income and resource level and who are not federally Medicaid eligible because the Medicaid ceiling does not permit a Federal Matching Payment for their medical services.

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Supersede 99-001

Approval Date MAY 1 2000 Effective OCT 1 1997

_____ The following reasonable
classifications of children
described above who are under age
_____ (18, 19) with family income at
or below the percent of the Federal
poverty level specified for the
classification

(ADD NARRATIVE DESCRIPTION(S) OF THE
REASONABLE CLASSIFICATION(S) AND THE
PERCENT OF THE FEDERAL POVERTY LEVEL
USED TO ESTABLISHED ELIGIBILITY FOR EACH
CLASSIFICATION.)

1902 (e) (12) of the Act _____ 20. A child under age _____ (not to
exceed age 19) who has been determined eligible is deemed to be
eligible for a total of _____ months (not to exceed 12 months
regardless of changes in circumstances other than attainment of the
maximum age stated above.

1920A of the Act _____ 21. Children under age 19 who are
determined by a "qualified entity" (as defined in §1920A (b) (3) (A))
based on preliminary information, to meet the highest applicable
income criteria specified in this plan.

The presumptive period begins on the day
that the determination is made. If an
application for Medicaid is filed on the
child's behalf by the last day of the
month following the month in which the
determination of presumptive eligibility
was made, the presumptive period ends on
the day that the State agency makes a
determination of eligibility based on that
application. If an application is not
filed on the child's behalf by the last
day of the month following the month the
determination of presumptive eligibility
was made, the presumptive period ends on
that last day.